Case 21-13142-elf Doc 1 Filed 11/24/21 Entered 11/24/21 08:40:25 Desc Main Document Page 1 of 52

| Fill in this information to identify your case: | | |
|---|---------------------------------|--------------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF PENNSYLVANIA | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part | 1: Identify Yourself | | | |
|------|--|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on | Frank | _ | Elizabeth |
| | your government-issued picture identification (for example, your driver's | First name | | First name |
| | license or passport). | Middle name | _ | Middle name |
| | Bring your picture identification to your | Gaffin | | Gaffin |
| | meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | FKA Elizabeth Schmidt |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9327 | | xxx-xx-0396 |

Debtor 1 Frank Gaffin
Debtor 2 Elizabeth Gaffin

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EIN | I have not used any business name or EINs. Business name(s) EIN |
| 5. | Where you live | 150 Deb Lane | If Debtor 2 lives at a different address: |
| | | Warminster, PA 18974 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Bucks | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. |
| | | Explain. (See 28 U.S.C. § 1408.) | Explain. (See 28 U.S.C. § 1408.) |

| Deb | otor 2 Elizabeth Gaffin | | | | Case number (if known) | |
|-----|---|--|--|---|---|-------------------------------------|
| | | | | | | |
| Par | t 2: Tell the Court About | Your Bankruptcy | Case | | | |
| 7. | The chapter of the Bankruptcy Code you are | | | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for a box. | Bankruptcy |
| | choosing to file under | Chapter 7 | | | | |
| | | ☐ Chapter 11 | | | | |
| | | ☐ Chapter 12 | | | | |
| | | ☐ Chapter 13 | | | | |
| 8. | How you will pay the fee | about how order. If yo a pre-print | y you may pay. Typ our attorney is subr ted address. | ically, if you are paying the fee you nitting your payment on your beha | with the clerk's office in your local court fourself, you may pay with cash, cashier's chalf, your attorney may pay with a credit card | eck, or money or check with |
| | | | | allments. If you choose this optios (Official Form 103A). | n, sign and attach the Application for Indivi | duals to Pay |
| | | ☐ I request but is not applies to | that my fee be wa required to, waive y your family size an | ived (You may request this option your fee, and may do so only if you do you are unable to pay the fee in | only if you are filing for Chapter 7. By law, ur income is less than 150% of the official prinstallments). If you choose this option, yo ial Form 103B) and file it with your petition. | overty line that u must fill out |
| | | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | |
| | iasi o years : | | iot | Whon | Coop number | |
| | | Distri Distri | - | When When | Casa numbar | |
| | | Distri | | When | Case number | |
| | | Distri | | wilen | Case Humber | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | |
| | | Debt | or | | Relationship to you | |
| | | Distri | ict | When | Case number, if known | |
| | | Debt | or | | Relationship to you | |
| | | Distri | ict | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. Go | to line 12. | | | |
| | residence : | ☐ Yes. Has | s your landlord obta | nined an eviction judgment against | you? | |
| | | | No. Go to line | 12. | | |
| | | | Yes. Fill out Inthis bankruptcy | | ludgment Against You (Form 101A) and file | it as part of |
| | | | | | | |

Debtor 1 Frank Gaffin

| | otor 1 Frank Gaffin Ditor 2 Elizabeth Gaffin | | | | Case number (if known) | | | |
|--|---|--|----------|---|--|--|--|--|
| Par | t 3: Report About Any Bu | ısinesses | You Owi | n as a Sole Propriet | or | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | e and location of busi | ness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | ber, Street, City, State | e & ZIP Code | | | |
| | it to this petition. | | Chec | ck the appropriate box | to describe your business: | | | |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) | | | |
| | | | | Commodity Broker | (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | | None of the above | | | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor. If you are filing under Chapter 11, the court must know whether you are a small business debtor or a | | can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. | | | | | | |
| F | For a definition of small | ■ No. | I am | not filing under Chap | ter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | | I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. | | | | |
| | | ☐ Yes. | | | I1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11. | | | |
| Par | t 4: Report if You Own or | Have Any | / Hazard | ous Property or Any | Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | | | | |
| | | | | | Number, Street, City, State & Zip Code | | | |
| | | | | | | | | |

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| Debtor 1 | Frank Gaffin | | |
|----------|--|------------------------|--|
| Debtor 2 | Elizabeth Gaffin | Case number (if known) | |
| Part 5: | Explain Your Efforts to Receive a Briefing About Credit Counseling | | |

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 Frank Gaffin Debtor 2 Elizabeth Gaffin | | | | Case n | umber (if known) | |
|---|---------------------|---|-----------------------------|---|---|------------|
| Part 6: Answer These Ques | tions for R | Reporting Purposes | | | | |
| 16. What kind of debts do you have? | 16a. | Are your debts primarily of individual primarily for a pe | | | e defined in 11 U.S.C. § 101(8) as "incu | rred by an |
| | | ☐ No. Go to line 16b. | | | | |
| | | Yes. Go to line 17. | | | | |
| | 16b. | Are your debts primarily money for a business or inv | | | debts that you incurred to obtain e business or investment. | |
| | | ☐ No. Go to line 16c. | | | | |
| | | ☐ Yes. Go to line 17. | | | | |
| | 16c. | State the type of debts you | owe that are not consu | mer debts or bu | usiness debts | |
| 17. Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to line 18. | | | |
| Do you estimate that after any exempt property is excluded and administrative expenses | | I am filing under Chapter 7, are paid that funds will be a | | | t property is excluded and administrativ ditors? | e expenses |
| are paid that funds will be available for distribution to unsecured creditors? | i | ☐ Yes | | | | |
| 18. How many Creditors do | 1 -49 | | 1 ,000-5,000 | | □ 25,001-50,000 | |
| you estimate that you owe? | □ 50-99 | | ☐ 5001-10,00 | | ☐ 50,001-100,000 | |
| | □ 100-1 □ 200-9 | | ☐ 10,001-25,0 | 000 | ☐ More than100,000 | |
| 19. How much do you | □ \$0 - \$ | \$50,000 | □ \$1,000,001 | - \$10 million | ☐ \$500,000,001 - \$1 billion | |
| estimate your assets to be worth? | | 001 - \$100,000 | | 1 - \$50 million | □ \$1,000,000,001 - \$10 bil | |
| | | ,001 - \$500,000 ,001 - \$1 million | | 1 - \$100 million 01 - \$500 million | | illion |
| 20. How much do you | □ \$0 - \$ | \$50,000 | □ \$1,000,001 | - \$10 million | □ \$500,000,001 - \$1 billion | |
| estimate your liabilities to be? | | 001 - \$100,000 | : : : : | 1 - \$50 million | \$1,000,000,001 - \$10 bi | |
| | | ,001 - \$500,000 ,001 - \$1 million | | 1 - \$100 million 01 - \$500 millior | | noillic |
| Part 7: Sign Below | | | | | | |
| For you | I have ex | xamined this petition, and I de | eclare under penalty of | perjury that the | information provided is true and correct | t. |
| · | | | | | gible, under Chapter 7, 11,12, or 13 of ad I choose to proceed under Chapter 7 | |
| | | orney represents me and I did nt, I have obtained and read t | | | is not an attorney to help me fill out thib). | S |
| | I request | t relief in accordance with the | e chapter of title 11, Unit | ted States Code | e, specified in this petition. | |
| | | tcy case can result in fines up | | | oney or property by fraud in connection to 20 years, or both. 18 U.S.C. §§ 152, 1 | |
| | /s/ Fran | nk Gaffin | | /s/ Elizabetl | | |
| | Frank C Signatur | Gaffin e of Debtor 1 | | Elizabeth G Signature of D | | |
| | Executed | | 1 | Executed on | November 10, 2021 | |
| | Signatur | e of Debtor 1 | 1 | Signature of D | Debtor 2 | |

| | | Document | Page / 0152 | |
|----------------------|---|---|-------------------------------|--|
| Debtor 1 Debtor 2 | Frank Gaffin Elizabeth Gaffin | | Cas | e number (if known) |
| | attorney, if you are ed by one | under Chapter 7, 11, 12, or 13 of title 11, Unite | ed States Code, and have e | informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b) |
| • | not represented by ey, you do not need spage. | and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect. | , certify that I have no know | ledge after an inquiry that the information in the |
| | | /s/ Joseph Quinn Signature of Attorney for Debtor | Date | MM / DD / YYYY |
| | | Joseph Quinn Printed name Ross, Quinn & Ploppert, P.C. Firm name 192 S. Hanover Street, Suite 101 | | |
| | | Pottstown, PA 19464 Number, Street, City, State & ZIP Code | | |
| | | Contact phone 610-323-5300 307467 PA Bar number & State | Email address | |

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|----------------|------------------|
| Debtor 1 | Frank Gaffin | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Elizabeth Gaffin | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | F PENNSYLVANIA | |
| Case number | | | | |
| (if known) | | | | Check if this is |
| | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | acceto. |
|-----|--|--------|--------------------------|
| | | | of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 256,400.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 13,844.27 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 270,244.27 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 240,930.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 57,282.00 |
| | Your total liabilities | \$ | 298,212.00 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,386.26 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,391.37 |
| Paı | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | | |
| 7. | ■ Yes What kind of debt do you have? | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

| Deptor 2 | Elizabeth Gaffin | Case number (if known) | | |
|----------|--|------------------------|------|---------|
| | n the Statement of Your Current Monthly Income: Cop A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L | | \$ 1 | ,620.59 |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | l claim |
|--|------|---------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Debtor 1

Frank Gaffin

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| S filing: Name Last Name Name Last Name DISTRICT OF PENNSYLVANIA | | ☐ Check if this is an amended filing |
|---|---|---|
| Name Last Name | | |
| Name Last Name | | |
| | | |
| DISTRICT OF PENNSYLVANIA | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | 12/15 |
| er Real Estate You Own or Have an Interest In y residence, building, land, or similar property? | | |
| What is the property? Check all that apply | | |
| Duplex or multi-unit building Condominium or cooperative | the amount of any secured | d claims on Schedule D: |
| Manufactured or mobile home | Current value of the | Current value of the |
| ☐ Land ☐ Investment property | entire property? \$256,400.00 | portion you own? \$256,400.00 |
| ☐ Timeshare | Describe the nature of y | our ownership interest |
| Who has an interest in the property? Check one | a life estate), if known. | ancy by the entheties, of |
| | · · · · · · | ancy by the entireties, or |
| e | If two married people are filing together, both are set to this form. On the top of any additional pages, er Real Estate You Own or Have an Interest In y residence, building, land, or similar property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$256,400.00 |

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debtor 1 Debtor 2 | Frank Gaffii Elizabeth G | | | Case number (if known) | |
|----------------------|-----------------------------|--|---|-------------------------------|---|
| Cars, va | ans, trucks, trac | ctors, sport utility ve | hicles, motorcycles | _ | |
| □ No | | | | | |
| ■ Yes | | | | | |
| | | | | B | l li |
| 3.1 Mak | | | Who has an interest in the property? Check one | | d claims or exemptions. Put cured claims on <i>Schedule D</i> : |
| Mod | | | Debtor 1 only | | Claims Secured by Property. |
| Year | r: 2001 | | Debtor 2 only | Current value of the | Current value of the |
| | roximate mileage: | 249000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Othe | er information: | | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | \$3,925.00 | \$3,925.00 |
| .pages y | you have attach | ed for Part 2. Write | rn for all of your entries from Part 2, including that number here | | \$3,925.00 |
| | | onal and Household It legal or equitable in | ems terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>Exampl</i> □ No | | furnishings nces, furniture, linens | s, china, kitchenware | | |
| ■ Yes. | Describe | | | | |
| | | Refrigerator, St | ove, Dishwasher | | \$1,000.0 |
| | | Dining Room Ta | able, China Cabinet | | \$400.0 |
| | | Living Room: S | ofa, 2 Recliners | | \$800.0 |
| | | | | | |
| | | Bedroom Set | | | \$1,000.0 |
| | | Washer/Dryer | | | \$700.0 |
| □ No | les: Televisions a | | eo, stereo, and digital equipment; computers, pri nedia players, games | inters, scanners; music colle | ections; electronic devices |
| | | 2 TVs | | | \$600.0 |

Official Form 106A/B Schedule A/B: Property

Entered 11/24/21 08:40:25 Case 21-13142-elf Doc 1 Filed 11/24/21 Page 12 of 52 Document Debtor 1 Frank Gaffin Debtor 2 Elizabeth Gaffin Case number (if known) 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Used Men's Clothing \$200.00 Used Women's Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Jewelry - Wedding Rings, Necklace \$600.00 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... 2 dogs \$10.00 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,510.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No
□ Yes.....

page 3

Entered 11/24/21 08:40:25 Case 21-13142-elf Doc 1 Filed 11/24/21 Page 13 of 52 Document Debtor 1 Frank Gaffin Debtor 2 Elizabeth Gaffin Case number (if known) 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Police and Fire FCU (Opened October 2021) \$2,352.13 17.1. Checking Police and Fire FCU (Opened October 2021) *9451 \$5.00 17.2. Savings Freedom Credit Union *1226 \$5.00 17.3. Share Freedom Credit Union *1226 (Overdrawn) \$0.00 17.4. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Pension** Local 837 (In Active Pay Status) \$1.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

Entered 11/24/21 08:40:25 Case 21-13142-elf Page 14 of 52 Document Debtor 1 Frank Gaffin Debtor 2 Elizabeth Gaffin Case number (if known) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2021 Prorated Federal Tax Refund (Based on 2020, \$51*11/12) \$46.75 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **United of Omaha Whole Life Insurance** \$1.999.39 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No

Doc 1

Filed 11/24/21

Entered 11/24/21 08:40:25 Case 21-13142-elf Doc 1 Filed 11/24/21 Page 15 of 52 Document Frank Gaffin Debtor 1 Debtor 2 Elizabeth Gaffin Case number (if known) ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$4,409.27 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

| Part | rt 8: List the Totals of Each Part of this Form | | | | |
|------|--|-------------|-------------|------------------------------|--------------|
| 55. | Part 1: Total real estate, line 2 | | | | \$256,400.00 |
| 56. | Part 2: Total vehicles, line 5 | | \$3,925.00 | | |
| 57. | Part 3: Total personal and household items, | line 15 | \$5,510.00 | | |
| 58. | Part 4: Total financial assets, line 36 | | \$4,409.27 | | |
| 59. | Part 5: Total business-related property, line | 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related proper | ty, line 52 | \$0.00 | | |
| 61. | . Part 7: Total other property not listed, line 54 | + | \$0.00 | | |
| 62. | . Total personal property. Add lines 56 through | 61 | \$13,844.27 | Copy personal property total | \$13,844.27 |

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$270,244.27

Official Form 106A/B Schedule A/B: Property page 6

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| Fill in this inform | mation to identify your | case: | | |
|---------------------|-------------------------|--------------------|--------------|------------------------------------|
| Debtor 1 | Frank Gaffin | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Elizabeth Gaffin | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | EASTERN DISTRICT C | PENNSYLVANIA | |
| Case number _ | | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Id | entify the | Property | / You C | Claim as | Exemp | ١t |
|------------|------------|----------|---------|----------|-------|----|
|------------|------------|----------|---------|----------|-------|----|

| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | | |
|----|--|--------------------------------------|--|---|------------------------------------|--|--|--|--|--|
| | ■ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | | | | | | | |
| | 150 Deb Lane Warminster, PA 18974 Bucks County | \$256,400.00 | | \$23,748.00 | 11 U.S.C. § 522(d)(1) | | | | | |
| | Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | 2001 Ford Ranger 249000 miles Line from Schedule A/B: 3.1 | \$3,925.00 | | \$3,925.00 | 11 U.S.C. § 522(d)(2) | | | | | |
| | Line from Scriedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Refrigerator, Stove, Dishwasher Line from Schedule A/B: 6.1 | \$1,000.00 | • | \$1,000.00 | 11 U.S.C. § 522(d)(3) | | | | | |
| | Line Holli Schedule A/B. 0.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Dining Room Table, China Cabinet Line from Schedule A/B: 6.2 | \$400.00 | | \$400.00 | 11 U.S.C. § 522(d)(3) | | | | | |
| | Line Holli Schedule A/B. 0.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |
| | Living Room: Sofa, 2 Recliners Line from Schedule A/B: 6.3 | \$800.00 | • | \$800.00 | 11 U.S.C. § 522(d)(3) | | | | | |
| | Line Horri Schedule AVD. U.S | | | 100% of fair market value, up to any applicable statutory limit | | | | | | |

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Elizabeth Gaffin Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Bedroom Set** 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 Line from Schedule A/B: 6.4 П 100% of fair market value, up to any applicable statutory limit Washer/Dryer 11 U.S.C. § 522(d)(3) \$700.00 \$700.00 Line from Schedule A/B: 6.5 100% of fair market value, up to any applicable statutory limit 2 TVs 11 U.S.C. § 522(d)(3) \$600.00 \$600.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit **Used Men's Clothing** 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Used Women's Clothing** 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Line from Schedule A/B: 11.2 100% of fair market value, up to any applicable statutory limit Jewelry - Wedding Rings, Necklace 11 U.S.C. § 522(d)(4) \$600.00 \$600.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 2 dogs 11 U.S.C. § 522(d)(5) \$10.00 \$10.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Checking: Police and Fire FCU 11 U.S.C. § 522(d)(5) \$2,352.13 \$2,352.13 (Opened October 2021) *9451 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Police and Fire FCU 11 U.S.C. § 522(d)(5) \$5.00 \$5.00 (Opened October 2021) *9451 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Share: Freedom Credit Union *1226 11 U.S.C. § 522(d)(5) \$5.00 \$5.00 Line from Schedule A/B: 17.3 П 100% of fair market value, up to any applicable statutory limit Federal: 2021 Prorated Federal Tax 11 U.S.C. § 522(d)(5) \$46.75 \$46.75 Refund (Based on 2020, \$51*11/12) Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit

Frank Gaffin

Debtor 1

| | | | | | · · | | |
|----|------------------|---|--------------------------------------|---------|---|------------------------------------|---|
| | btor 1 btor 2 | Frank Gaffin Elizabeth Gaffin | | | Case number (if known) | | _ |
| | | description of the property and line on dule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | | ed of Omaha Whole Life rance | \$1,999.39 | | \$1,999.39 | 11 U.S.C. § 522(d)(8) | |
| | | from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | (Sub | ou claiming a homestead exemption lect to adjustment on 4/01/22 and every | | | led on or after the date of adjustme | nt.) | |
| | _ | Yes. Did you acquire the property cover | ed by the exemption wi | ithin 1 | .215 days before you filed this case | ? | |
| | | □ No | | | , , , | | |
| | | ☐ Yes | | | | | |

| | | | Document F | Page 19 | of 52 | | |
|---------|---------------------------------------|---------------------|---|--|--|--|-------------------|
| Fill i | n this information | n to identify you | ır case: | | | | |
| Debt | tor 1 Fr | ank Gaffin | | | | | |
| | Firs | st Name | Middle Name | _ast Name | | | |
| Debt | tor 2 EI | izabeth Gaffin | 1 | | | | |
| (Spou | ise if, filing) Firs | st Name | Middle Name | _ast Name | | | |
| Unite | ed States Bankrupt | tcy Court for the: | EASTERN DISTRICT OF PENNS | SYLVANIA | | | |
| Case | e number | | | | | | |
| (if kno | | | | | | ☐ Check | if this is an |
| | | | | | | ameno | led filing |
| ~ | = | | | | | | |
| Offi | cial Form 10 | <u>6D</u> | | | | | |
| Scl | hedule D: (| Creditors | Who Have Claims S | ecured | by Propert | У | 12/15 |
| s nee | | | If two married people are filing together, out, number the entries, and attach it to | | | | |
| | any creditors have | claims secured by | y your property? | | | | |
| ſ | ☐ No. Check this h | oox and submit th | his form to the court with your other so | hedules Yo | ou have nothing else t | n report on this form | |
| | Yes. Fill in all of | | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | our navo nouning oldo t | o roport on time form. | |
| | | | Delow. | | | | |
| Part | List All Sec | ured Claims | | | Column A | Column B | Column C |
| for ea | ach claim. If more that | an one creditor has | more than one secured claim, list the credite a particular claim, list the other creditors in cal order according to the creditor's name. | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| 2.1 | AmeriCredit/G | М | Describe the property that secures the | claim: | \$8,278.00 | Unknown | Unknown |
| | Creditor's Name | | Lease - 2020 Chevrolet Equino | ox | | | |
| | | | | | | | |
| | Attn: Bankrupt | • | As of the date you file, the claim is: Che | eck all that | | | |
| | Po Box 183853 | | apply. | oon an mar | | | |
| | Arlington, TX 7 | | ☐ Contingent | | | | |
| | Number, Street, City, S | tate & Zip Code | Unliquidated | | | | |
| Who | owes the debt? C | heck one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| _ ` | | ricon oric. | ☐ An agreement you made (such as mo | rtaage or sec | ured | | |
| _ | ebtor 1 only | | car loan) | rigage or sec | urou | | |
| | ebtor 2 only bebtor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, mecha | nic'e lien\ | | | |
| _ | t least one of the deb | | ☐ Statutory lien (such as tax lien, mecha | ariics iieff) | | | |
| _ | theck if this claim re | | Other (including a right to offset) | | | | |
| | community debt | | cc. (mordaing a right to shoot) | | | | - |

Opened 06/20 Last

Date debt was incurred Active 10/21

Last 4 digits of account number

| Debtor 1 | Frank Gaf | fin | | Cas | se number (if known) | | |
|-----------------|--------------------------------|----------------------|---|-----------------|----------------------|--------------|--------|
| | First Name | Middle Na | me Last Name | | | | |
| Debtor 2 | | | | | | | |
| | First Name | Middle Na | me Last Name | | | | |
| 2.2 Fl a | agstar Bank | | Describe the property that secures the | claim: | \$186,228.00 | \$256,400.00 | \$0.00 |
| Cre | ditor's Name | | 150 Deb Lane Warminster, PA | 18974 | | | |
| | | | Bucks County | | | | |
| | tn: Bankrup | | As of the date you file, the claim is: Che | ck all that | | | |
| | 51 Corporat | | apply. | ck all triat | | | |
| Tr | oy, MI 48098 | 3 | ☐ Contingent | | | | |
| Nur | mber, Street, City, S | State & Zip Code | Unliquidated | | | | |
| | | | Disputed | | | | |
| | es the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| ☐ Debto | • | | An agreement you made (such as mor | tgage or secure | ed | | |
| Debto | or 2 only | | car loan) | | | | |
| Debto | or 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| At lea | st one of the deb | otors and another | ☐ Judgment lien from a lawsuit | | | | |
| | k if this claim re | elates to a | Other (including a right to offset) | | | | |
| com | munity debt | | | | | | |
| | | Opened | | | | | |
| | | 11/16 Last | | | | | |
| Date deb | t was incurred | Active 11/21 | Last 4 digits of account number | 0590 | | | |
| | | | | | | | |
| 2.3 W | ilmington Sa | v Fund So | Describe the property that secures the | claim: | \$46,424.00 | \$256,400.00 | \$0.00 |
| Cre | ditor's Name | | 150 Deb Lane Warminster, PA | 18974 | | | |
| | | | Bucks County | | | | |
| 00 | O N. Mauleat | | As of the date you file, the claim is: Che | ck all that | | | |
| | 8 N Market ilmington, D | E 10800 | apply. | | | | |
| | | | Contingent | | | | |
| Nur | mber, Street, City, S | state & Zip Code | Unliquidated | | | | |
| Who ow | es the debt? C | hock one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| Debto | | fieck one. | _ | | I | | |
| Debto | - | | An agreement you made (such as mor car loan) | tgage or secure | ea | | |
| _ | or 2 only or 1 and Debtor 2 | l only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | | | |
| | | otors and another | ☐ Judgment lien from a lawsuit | , | | | |
| _ | k if this claim re | | ☐ Other (including a right to offset) | | | | |
| | munity debt | | | | | | |
| | | Opened | | | | | |
| | | 03/20 Last | | | | | |
| Date deb | t was incurred | Active 10/21 | Last 4 digits of account number | 0001 | | | |
| | | | • | | | | |
| | | | | | | | |
| Add the | e dollar value of | f your entries in Co | olumn A on this page. Write that number | here: | \$240,930.0 | 00 | |
| | s the last page | • | the dollar value totals from all pages. | | \$240,930.0 | 00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | | D | ocument | Page 23 | L of 52 | | |
|--|---|---|---|--|---|---|---|---|
| Fill in | this informa | ation to identify your | case: | | | | | |
| Debto | r 1 | Frank Gaffin | | | | | | |
| Dobto | | First Name | Middle Nar | ne | Last Name | | | |
| Debto | r 2 | Elizabeth Gaffin | | | | | | |
| (Spouse | e if, filing) | First Name | Middle Nar | ne | Last Name | | | |
| United | d States Ban | kruptcy Court for the: | EASTERN DI | STRICT OF PE | NNSYLVANIA | | | |
| Case (if know | number | | | | | | _ | Charle if this is an |
| (II KIIOW | | | | | | | | Check if this is an amended filing |
| Offic | ial Form | 106E/F | | | | | | |
| | | F: Creditors W | ho Have I | Jnsecured | d Claims | | | 12/15 |
| any exe Schedu Schedu Ieft. Att name a | ecutory contra ule G: Executo ule D: Creditor ach the Conti and case numb | acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known). | that could resuli ired Leases (Offi ured by Property e. If you have no | t in a claim. Also icial Form 106G). r. If more space is o information to r | list executory of Do not include s needed, copy | contracts on Schedule A/B: F any creditors with partially s the Part you need, fill it out, do not file that Part. On the to | Property (Offi secured claim number the | ms that are listed in entries in the boxes on the |
| Part 1 | | of Your PRIORITY Un | | | | | | |
| _ | | s have priority unsecure | d claims against | you? | | | | |
| | No. Go to Pa | rt 2. | | | | | | |
| | Yes. | | | | | | | |
| Part 2 | List All | of Your NONPRIORIT | Y Unsecured (| Claims | | | | |
| | | s have nonpriority unsec | | | | | | |
| _ | | e nothing to report in this pa | _ | • | th your other sch | odulos | | |
| | _ | e nothing to report in this pa | art. Submit triis io | iiii to the court wit | in your other sch | euules. | | |
| | Yes. | | | | | | | |
| un tha | secured claim | , list the creditor separately | / for each claim. F | or each claim liste | ed, identify what | b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl | aims already | included in Part 1. If more |
| | | | | | | | | Total claim |
| 4.1 | Affirm, Ir | | l | ast 4 digits of ac | count number | WTDG | | \$170.00 |
| | Attn: Bai | Creditor's Name nkruptcy Ila St, Floor 4 | \ | When was the del | bt incurred? | Opened 12/20 Last / 9/20/21 | Active | |
| | | gh, PA 15212 | | | | | | |
| | | eet City State Zip Code red the debt? Check one. | , | As of the date you | u file, the claim | is: Check all that apply | | |
| | ■ Debtor 1 | | ı | ☐ Contingent | | | | |
| | Debtor 2 | · · | | ☐ Unliquidated | | | | |
| | _ | and Debtor 2 only | | Disputed | | | | |
| | | one of the debtors and and | _ | ☐ Disputed Type of NONPRIC | ORITY unsecure | d claim: | | |
| | | f this claim is for a comr | rinei r | ☐ Student loans | | | | |
| | debt | | [| ☐ Obligations aris | sing out of a sepa | ration agreement or divorce th | at you did no | ot |
| | Is the claim | subject to offset? | _ | eport as priority cla | | g plans, and other similar debt | ·e | |
| | | | | • | • | • | | |
| | ☐ Yes | | | Other. Specify | Unsecured | | | |

| Debtor 1 Debtor 2 | Frank Gaffin Elizabeth Gaffin | | Case number (if known) | | |
|----------------------|---|---|--|------------|--|
| | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 0953 | \$9,727.00 | |
| | Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899 | When was the debt incurred? | Opened 11/14 Last Active 10/05/21 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | |
| | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | 4876 | \$2,384.00 | |
| | Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899 | When was the debt incurred? | Opened 10/18 Last Active 10/21 | | |
| = | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | | | |
| | No | Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Credit Card | | | |
| | Capital One | Last 4 digits of account number | 6383 | \$1,227.00 | |
| | Nonpriority Creditor's Name AttnL: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 01/16 Last Active 10/21 | | |
| _ | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | l claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | |

| Debtor Debtor | 1 Frank Gaffin 2 Elizabeth Gaffin | | Case number (if known) | |
|------------------|--|---|---|------------|
| 4.5 | Capital One | Last 4 digits of account number | 3001 | \$164.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 10/11 Last Active | ******* |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt | | d claim: aration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ No □ Yes | report as priority claims Debts to pension or profit-sharin Other. Specify Credit Carc | | |
| 4.6 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 3779 | \$5,781.00 |
| | Attn: Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 10/15 Last Active 10/21 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.7 | Cbna Nonpriority Creditor's Name | Last 4 digits of account number | 7111 | \$4,818.00 |
| | Attn: Centralized Bankruptcy Po Box 790034 St. Louis, MO 63179 | When was the debt incurred? | Opened 09/16 Last Active 10/21 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | □ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | Other. Specify Credit Card | | |
| | — 163 | Other. Specify | • | |

| | 1 Frank Gaffin 2 Elizabeth Gaffin | | Case number (if known) | |
|-----|--|--|---|------------|
| 4.8 | Chase Card Services Nonpriority Creditor's Name | Last 4 digits of account number | 6180 | \$1,866.00 |
| | Attn: Bankruptcy Po Box 15298 | When was the debt incurred? | Opened 10/20 Last Active 10/11/21 | |
| | Wilmington, DE 19850 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | | | |
| | _ | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | Student loans | a ciaiiii. | |
| | ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | nation agreement of alverse that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | □Yes | Other. Specify Credit Card | <u> </u> | |
| 4.9 | Comenitybank/trwrdsv Nonpriority Creditor's Name | Last 4 digits of account number | 6105 | \$3,505.00 |
| | Attn: Bankruptcy Po Box 182273 | When was the debt incurred? | Opened 12/17 Last Active 10/01/21 | |
| | Columbus, OH 43218 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | a ciaim: | |
| | ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | ifation agreement of divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 | ComenityCapital/Boscov | Last 4 digits of account number | 6449 | \$1,344.00 |
| | Nonpriority Creditor's Name | _ | On an add 4440 Last Astiss | |
| | Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 11/18 Last Active 10/21 | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Charge Acc | count | |
| | | • — | | |

| | Elizabeth Gaffin | | Case number (if known) | |
|----------|--|--|--|-------------|
| 4.1 | Costco Anywhere Visa Card | Last 4 digits of account number | 6944 | \$4,695.00 |
| <u>'</u> | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117 Number Street City State Zip Code | When was the debt incurred? As of the date you file, the claim in the | Opened 10/18 Last Active 09/21 s: Check all that apply | · |
| | Who incurred the debt? Check one. | • | , | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | l | |
| 4.1 2 | Credit One Bank | Last 4 digits of account number | 4772 | \$835.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193 | When was the debt incurred? | Opened 06/15 Last Active 10/21 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 3 | Freedom Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | 0200 | \$11,860.00 |
| | Attn: Bankruptcy 626 Jacksonville Road, Suite 250 Warminster, PA 18974 | When was the debt incurred? | Opened 06/18 Last Active 10/21 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Personal Le | oan and Overdraft Fees | |
| | | · · · | | |

| IC Systems, Inc | Last 4 digits of account number | 4561 | \$98.0 |
|---|--|--|------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 64378 St. Boyl MN 55464 | When was the debt incurred? | Opened 03/20 | |
| St. Paul, MN 55164 Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Medical Ca | Attorney Premier Immediate re | |
| Mariner Finance | Last 4 digits of account number | 7913 | \$2,919.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy 8211 Town Center Drive | When was the debt incurred? | Opened 12/20 Last Active 10/08/21 | |
| Nottingham, MD 21236 Number Street City State Zip Code | As of the date you file, the claim i | s. Check all that anniv | |
| Who incurred the debt? Check one. | As of the date you me, the oldmi | 3. Official and apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| Mariner Finance | Last 4 digits of account number | 6517 | \$2,698.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | _ | Opened 01/21 Last Active | |
| 8211 Town Center Drive Nottingham, MD 21236 Number Street City State Zip Code | When was the debt incurred? | 10/21 | |
| Who incurred the debt? Check one. | As of the date you file, the claim i | э. Опеск ан шасарріу | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | d alaims | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | anlone and other similar date. | |
| ■ No | Debts to pension or profit-sharin | g pians, and other similar debts | |
| Yes | Other. Specify Unsecured | | |

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| Synchrony Bank/Lowes | Last 4 digits of account number | 0205 | \$ |
|---|-------------------------------------|--|----|
| Nonpriority Creditor's Name Attn: Bankruptcy | _ | Opened 05/20 Last Active | |
| Po Box 965060 | When was the debt incurred? | 10/21 | |
| Orlando, FL 32896 | _ | | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | , | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Tatal Olaim

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | | 0.00 |
| | ū | you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 57,282.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 57,282.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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| Fill in this infor | mation to identify your | case: | · | |
|------------------------|--------------------------|--------------------|----------------|--|
| Debtor 1 | Frank Gaffin | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Elizabeth Gaffin | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F PENNSYLVANIA | |
| Case number (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

1 AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096 Opened Opened 06/20 Last Active 10/21 Lease - 2020 Chevrolet Equinox

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| | | Docume | nı Page 29 0 | 1 52 | |
|---|---|--|---|--|--|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Frank Coffin | | | | |
| Depioi i | Frank Gaffin First Name | Middle Name | Last Name | | |
| Debtor 2 | Elizabeth Gaffin | | | | |
| (Spouse if, filin | | Middle Name | Last Name | | |
| United Stat | tes Bankruptcy Court for the: | EASTERN DISTRICT C | F PENNSYLVANIA | | |
| Case numb | per | | | | |
| (if known) | | | | | Check if this is an amended filing |
| Sched Codebtors | | re also liable for any deb | | s complete and accurate as po | |
| | nd number the entries in the and case number (if known) | | | o this page. On the top of any A | Additional Pages, write |
| 1. Do y | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No □ Yes | | | | | |
| Arizona No. Yes. 3. In Coluin line Form 1 | a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spout umn 1, list all of your codebt 2 again as a codebtor only i | Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran | e with you at the time? spouse as a codebtor tor or cosigner. Make | y? (Community property states and ngton, and Wisconsin.) if your spouse is filing with your soure you have listed the credite 6G). Use Schedule D, Schedule | u. List the person shown or on Schedule D (Official |
| (| Column 1: Your codebtor Name, Number, Street, City, State and Z | P Code | | Column 2: The creditor to v | - |
| | Name | | | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line | |
| | Number Street City | State | ZIP Code | | |
| 3.2 | Name | | | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ | |
| | Number Street City | State | ZIP Code | _ | |

| | | | | | | _ | | | |
|------------|---|-------------------------------|--|---------------------|----------------|----------------------------------|-----------------------------|--------------------------------------|-----------------|
| Fill | in this information to identify your c | ase: | | | | | | | |
| Del | otor 1 Frank Gaffii | 1 | | | | | | | |
| | otor 2 Elizabeth G | affin | | | _ | | | | |
| Uni | ted States Bankruptcy Court for the | EASTERN DISTRICT | OF PENNSYLVANIA | А | | | | | |
| | se number | | - | | | Check if this | | | |
| (If kr | nown) | | | | | ☐ An ame | | | |
| _ | | | | | | | | ring postpetition following date: | |
| O. | fficial Form 106l | | | | | MM / DI | D/ YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/15 |
| sup spo | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your ith you, do not inclu | spouse ide infor | is liv mati | ing with you, i on about your | nclude info spouse. If r | rmation about more space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debt | or 2 or non | -filing spouse | |
| | If you have more than one job, | | ☐ Employed | | | □ Er | nployed | | |
| | attach a separate page with information about additional employers. | Employment status | ■ Not employed | | | ■ No | ot employed | | |
| | op.e, e.e. | Occupation | Retired | | | Disa | bled | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed the | here? | | | | | | |
| Par | t 2: Give Details About Mo | nthly Income | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If y | you have nothing to r | eport for | any | line, write \$0 in | the space. I | nclude your no | n-filing |
| | u or your non-filing spouse have m e space, attach a separate sheet to | | ombine the information | n for all | emplo | oyers for that pe | erson on the | lines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.0 | 90 \$ | 0.00 | |
| 3. | Estimate and list monthly over | ime pay. | | 3. | +\$ | 0.0 | <u> </u> | 0.00 | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | 0.00 | |

Official Form 106I Schedule I: Your Income page 1

| Debi | tor 1 tor 2 | Frank Gaffin Elizabeth Gaffin | _ | Case number (if | known) | | | |
|------|----------------|---|--------|-----------------|--------|-------|---------------------------|----------|
| | | | | For Debtor 1 | | | ebtor 2 or ling spouse | |
| | Сор | y line 4 here | 4. | \$ | 0.00 | \$ | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$ | 0.00 | + \$ | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$ | 0.00 | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | 0.00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | • | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | 0.00 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$ 1,87 | 6.00 | \$ | 1,458.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | 0.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | | 2.26 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | 0.00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ 2,92 | 8.26 | \$ | 1,458.00 |] |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. \$ | 2,928.26 | + \$ | 1,458 | 3.00 = \$ | 4,386.26 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _,0_0:_0 |] [`- | | | 1,000.20 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depend | | | | nedule J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | Combin | |
| 13. | Dov | you expect an increase or decrease within the year after you file this form | ? | | | | monthly | income |
| | | No. | | | | | | |
| | | Yes. Explain: | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this informa | tion to identify yo | our case: | | | 1 | | |
|------|-----------------------------|---|----------------|---|--|-------------|-------------------|---|
| | otor 1 | Frank Gaffin | | | | Chr | eck if this is: | |
| | 7.01 T | Frank Gailli | l | | | | An amended filing | |
| | otor 2 ouse, if filing) | Elizabeth Ga | ıffin | | | | | wing postpetition chapter the following date: |
| Unit | ed States Bankr | ruptcy Court for the | : EASTE | RN DISTRICT OF PENNS | YLVANIA | | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/15 |
| info | ormation. If m | | eded, atta | If two married people ar ch another sheet to this n. | | | | |
| Par | | ibe Your House | hold | | | | | |
| 1. | Is this a joir ☐ No. Go to | | | | | | | |
| | _ | | in a separ | ate household? | | | | |
| | ■ N | | | | | | | |
| | | | st file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | ehold of De | btor 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | | | | | | | □ No |
| | dependents | names. | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ No |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 2 | Do vour ovr | oncoc includo | _ | | | | _ | ☐ Yes |
| 3. | expenses o | enses include f people other t d your depende | han 👝 | No Yes | | | | |
| exp | imate your ex | | our bankr | y Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | n assistance an | | government assistance in Sluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| - | | - | hin ava | and for your residence. | odudo firet es este | | | |
| 4. | | nd any rent for th | | ses for your residence. In ir lot. | nciude first mortgag | e 4. | \$ | 1,533.93 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | | | | 4b. | | 0.00 |
| | | • | • | ipkeep expenses | | 4c. | | 100.00 |
| 5. | | owner's associat | | dominium dues our residence, such as ho | me equity loans | 4d. 5. | · | 0.00 540.00 |
| ٥. | aaonan | aaac bayiii | 2.1.0 /O. ye | | no oquity louis | o. | — | 370.00 |

| | | Frank Gaffin Elizabeth Gaffin | Case num | ber (if known) | |
|-------------|-------------------------|--|-------------|----------------|----------|
| 6. | Utilitie | 98: | | | |
| | | Electricity, heat, natural gas | 6a. | | 200.00 |
| | 6b. | Water, sewer, garbage collection | 6b. | \$ | 80.00 |
| | | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · <u> </u> | 179.00 |
| | | Other. Specify: | 6d. | | 0.00 |
| 7. | Food | and housekeeping supplies | 7. | \$ | 700.00 |
| 8. | Childo | care and children's education costs | 8. | \$ | 0.00 |
| 9. | Clothi | ng, laundry, and dry cleaning | 9. | \$ | 50.00 |
| 10. | Perso | nal care products and services | 10. | \$ | 50.00 |
| 11. | Medic | al and dental expenses | 11. | \$ | 20.00 |
| 12. | | portation. Include gas, maintenance, bus or train fare. t include car payments. | 12. | \$ | 200.00 |
| 13. | | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| | | able contributions and religious donations | 14. | | 0.00 |
| | Insura | • | | · | <u> </u> |
| | | t include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. | Life insurance | 15a. | \$ | 115.49 |
| | 15b. | Health insurance | 15b. | \$ | 0.00 |
| | 15c. | Vehicle insurance | 15c. | \$ | 113.00 |
| | 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| 16. | Taxes Specif | Do not include taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| 17. | | Iment or lease payments: | | | 0.00 |
| | | Car payments for Vehicle 1 | 17a. | \$ | 359.95 |
| | | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | | Other. Specify: | 17c. | · | 0.00 |
| | | Other. Specify: | 17d. | · | 0.00 |
| 18. | | payments of alimony, maintenance, and support that you did not report as | | | |
| | | ted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · <u> </u> | 0.00 |
| 19. | Other Specif | payments you make to support others who do not live with you. | 19. | \$ | 0.00 |
| 20. | | real property expenses not included in lines 4 or 5 of this form or on Sched | | our Income. | |
| | | Mortgages on other property | 20a. | | 0.00 |
| | | Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| <u> 1</u> . | | : Specify: Pet Expenses | 21. | +\$ | 100.00 |
| 22. | Calcu | late your monthly expenses | | | |
| | 22a. A | dd lines 4 through 21. | | \$ | 4,391.37 |
| | 22b. C | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | , |
| | | dd line 22a and 22b. The result is your monthly expenses. | | \$ | 4,391.37 |
| 23. | Calcu | late your monthly net income. | | | |
| | | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,386.26 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 4,391.37 |
| | | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -5.11 |
| 24. | Do yo For exa | u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage? | ı file this | s form? | |
| | ☐ Yes | | | | |
| | — ге: | э. Ехринт пого. | | | |

| Fill in this info | ormation to identify your | case: | | | | |
|----------------------------------|--|--------------------------|---------------------------------|---|-------|--|
| Debtor 1 | Frank Gaffin | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Elizabeth Gaffin | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States I | Bankruptcy Court for the: | EASTERN DISTRICT | OF PENNSYLVANIA | | | |
| Case number | | | | | | |
| (if known) | | | | ☐ Check if this amended filir | | |
| Declara | | | I Debtor's Sche | | 12/15 | |
| obtaining mon years, or both. | | n connection with a bar | | king a false statement, concealing prop nes up to \$250,000, or imprisonment for | | |
| Did you p | pay or agree to pay some | one who is NOT an atto | orney to help you fill out bank | ruptcy forms? | | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) | | |
| | nalty of perjury, I declare are true and correct. | that I have read the sur | mmary and schedules filed wi | th this declaration and | | |
| X /s/ Fr | ank Gaffin | | X /s/ Elizabeth G | affin | | |
| | k Gaffin | | Elizabeth Gaff | in | | |
| Signa | ture of Debtor 1 | | Signature of Deb | tor 2 | | |
| Date | November 10, 2021 | | Date _Novemb | per 10, 2021 | | |

| Fill ir | this informa | ation to identify your | case: | | | |
|---|--------------------------------|--|--|---|---|---|
| Debto | | Frank Gaffin | | | | |
| | | First Name | Middle Name | Last Name | | |
| Debto | or 2 e if, filing) | Elizabeth Gaffin | Middle Name | Last Name | | |
| | , | | | | | |
| Unite | d States Ban | kruptcy Court for the: | EASTERN DISTRICT OF | PENNSYLVANIA | | |
| Case (if know | number | | | | _ | Check if this is an mended filing |
| Sta | | of Financial | | duals Filing for B | | 4/19 |
| nforn numb | nation. If mo er (if known) | ore space is needed,). Answer every ques | attach a separate sheet to stion. | this form. On the top of an | equally responsible for sup y additional pages, write you | |
| Part ' | Give De | etails About Your Ma | rital Status and Where You | ı Lived Before | | |
| 1. V | Vhat is your | current marital statu | s? | | | |
| • • | ■ Married □ Not marri | ed | | | | |
| 2. C | uring the las | st 3 years, have you | lived anywhere other than | where you live now? | | |
| • | ■ No ■ Yes. List | all of the places you li | ved in the last 3 years. Do n | ot include where you live nov | ν. | |
| | Debtor 1 Price | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | ddress: | Dates Debtor 2 lived there |
| | | | | | nity property state or territory ico, Texas, Washington and W | |
| ı | No | | | | | |
| | Yes. Mak | ce sure you fill out Sch | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part 2 | Explain | the Sources of You | r Income | | | |
| F | ill in the total | amount of income you | received from all jobs and | ng a business during this yeall businesses, including parter together, list it only once un | | ndar years? |
| Г |] No | | | | | |
| I | - | n the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | of current year until | - | \$8,944.76 | ☐ Wages, commissions, | ¢0.00 |
| | | | ■ Wages, commissions, bonuses, tips | 40,0 1 0 | bonuses, tips | \$0.00 |

Official Form 107

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Frank Gaffin Debtor 1 Debtor 2 **Elizabeth Gaffin** Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$19,154.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 For the calendar year before that: \$24,515.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security Social Security** \$16,038.00 \$20,636.00 the date you filed for bankruptcy: **Benefits Benefits Pension** \$11,574.86 For last calendar year: Social Security \$43,010.00 (January 1 to December 31, 2020) **Benefits Pension** \$12,927.00 **Gambling Winnings** \$2,380,00 For the calendar year before that: Social Security \$42,324.00 (January 1 to December 31, 2019) **Benefits Pension** \$12,927.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Entered 11/24/21 08:40:25 Case 21-13142-elf Doc 1 Filed 11/24/21 Page 37 of 52 Document Debtor 1 Frank Gaffin Debtor 2 **Elizabeth Gaffin** Case number (if known) Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you Insider's Name and Address Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

☐ Yes
Official Form 107

Amount

Creditor Name and Address

Date action was

taken

| Deb | tor 2 Elizabeth Gaffin | Case number | (if known) | |
|------|--|---|-----------------------|--------------------------|
| | | | | |
| Pari | 15: List Certain Gifts and Contributions | | | |
| 3. | _ ' ' ' | cy, did you give any gifts with a total value of more | than \$600 per person | ? |
| | NoYes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave | Value |
| | per person | | the gifts | |
| | Person to Whom You Gave the Gift and Address: | | | |
| 4. | Within 2 years before you filed for bankrupto | cy, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | ■ No | | | |
| | Yes. Fill in the details for each gift or contr | | | |
| | Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Dates you contributed | Value |
| | Charity's Name Address (Number, Street, City, State and ZIP Code) | | | |
| Pari | | | | |
| | | | | |
| | Within 1 year before you filed for bankruptcy or gambling? | y or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Describe the property you lost and De | scribe any insurance coverage for the loss | Date of your | Value of property |
| | | lude the amount that insurance has paid. List pending | loss | lost |
| | ins | urance claims on line 33 of Schedule A/B: Property. | | |
| Par | 7: List Certain Payments or Transfers | | | |
| | consulted about seeking bankruptcy or prep | y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require | | rty to anyone you |
| | _ | a. a.a., a. a.a.a., aaaaag agaaaaaa aaaaaaqas | | |
| | ☑ No☑ Yes. Fill in the details. | | | |
| | Person Who Was Paid | Description and value of any property | Date payment | Amount of |
| | Address Email or website address | transferred | or transfer was made | payment |
| | Person Who Made the Payment, if Not You | | made | |
| | Ross, Quinn & Ploppert, P.C. 192 S. Hanover Street, Suite 101 | Attorney Fees | 10/18/21 - \$500 | \$1,500.00 |
| | Pottstown, PA 19464 | | 11/5/21 - \$500 | |
| | | | 11/22/21 - \$500 | |
| | | | ф 300 | |
| | Eastern District Court of Pennsylvania | Court Filing Fee | 11/22/21 - | \$338.00 |
| | | | \$338 | |
| | Abacus Credit Counseling | Credit Counseling | 11/11/21 - \$25 | \$25.00 |
| | 15760 Ventura Boulevard | • | • | |
| | Suite 1240 Encino, CA 91436 | | | |
| | | | | |
| | | | | |

Debtor 1 Frank Gaffin

Debtor 1 Frank Gaffin
Debtor 2 Elizabeth Gaffin Case number (if known)

| 17. | Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you No | rs or to make payments | | | or transfer any proper | rty to anyone who |
|-----|--|---|--------------------------------|--------------|---|---|
| | Yes. Fill in the details. Person Who Was Paid Address | Description and v transferred | ralue of any propei | rty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details. | usiness or financial affa ade as security (such as t | airs? the granting of a sec | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and v property transfer | | | any property or received or debts change | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | |
| | Name of trust | Description and v | alue of the proper | ty transferr | red | Date Transfer was made |
| | List of Certain Financial Accounts, Ins | • | , | • | | |
| 20. | Within 1 year before you filed for bankruptc; sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, association of the cooperative | or other financial accou | nts; certificates of | | | , , |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo | nte account was osed, sold, oved, or unsferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed for | bankruptcy, any s | safe deposi | t box or other deposi | tory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | escribe the | contents | Do you still have it? |
| 22. | Have you stored property in a storage unit o ■ No □ Yes. Fill in the details. | or place other than your | home within 1 yea | ar before yo | ou filed for bankruptc | y? |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had to it? Address (Number, S State and ZIP Code) | | escribe the | contents | Do you still have it? |
| | | | | | | |

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Debtor 1 Frank Gaffin Debtor 2 **Elizabeth Gaffin** Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation

☐ An owner of at least 5% of the voting or equity securities of a corporation

Entered 11/24/21 08:40:25 Desc Main Case 21-13142-elf Doc 1 Filed 11/24/21 Page 41 of 52 Document Frank Gaffin Debtor 1 Debtor 2 Elizabeth Gaffin Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Elizabeth Gaffin /s/ Frank Gaffin Frank Gaffin Elizabeth Gaffin Signature of Debtor 1 Signature of Debtor 2 Date November 10, 2021 Date November 10, 2021 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

■ No

☐ Yes. Name of Person

| Fill in this infor | mation to identify your | case: | | |
|---------------------------------|--|---------------------|---|---|
| Debtor 1 | Frank Gaffin | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | _ |
| Debtor 2 (Spouse if, filing) | Elizabeth Gaffin First Name | Middle Name | Last Name | _ |
| United States B | ankruptcy Court for the: | EASTERN DISTR | ICT OF PENNSYLVANIA | |
| | • , | | | _ |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | | n for Indiv | iduals Filing Under Cha | apter 7 12/15 |
| - | dividual filing under cha | - | out this form if: | |
| You must file th | ever is earlier, unless th | ithin 30 days after | ot expired. you file your bankruptcy petition or by the c e time for cause. You must also send copies | |
| | eople are filing together | in a joint case, bo | th are equally responsible for supplying cor | rect information. Both debtors must |
| | and accurate as possib your name and case nur | | needed, attach a separate sheet to this for | n. On the top of any additional pages, |
| Part 1: List Y | our Creditors Who Have | e Secured Claims | | |
| | | | : Creditors Who Have Claims Secured by Pr | operty (Official Form 106D) fill in the |
| information b | elow. | | - | |
| Identify the c | reditor and the property t | hat is collateral | What do you intend to do with the proper secures a debt? | ty that Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's | AmeriCredit/GM Finar | ncial | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| Description o | f Lease - 2020 Chev | rolet Equinox | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt | t: | • | Retain the property and [explain]: Retain and Continue Payments | |
| | | | | |
| Creditor's | Flagstar Bank | | ☐ Surrender the property. ☐ Retain the property and redeem it. | □No |
| Description o | f 150 Deb Lane War | mineter PA | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt | 18974 Bucks Cou | • | Retain the property and [explain]: Retain and Continue Payments | |
| | | | | |
| Creditor's \ | Wilmington Sav Fund | So | ☐ Surrender the property. ☐ Retain the property and redeem it. | □No |
| Description o | f 150 Deb Lane War | minster, PA | Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

■ Retain the property and [explain]:

18974 Bucks County

| Debtor 1 | Frank Gaffin | | | | | |
|---|---------------|--|-----------------------------|------------------------------------|---|--|
| Debtor 2 | Elizabeth | Gaffin | | Case number (if known) | | |
| securir | ng debt: | | Retain and Con | tinue Payments | _ | |
| | | nexpired Personal Property Lea | | | | |
| n the info | ormation belo | | s. Unexpired leases are lea | ases that are still in effect; the | d Leases (Official Form 106G), fill e lease period has not yet ended. 2). | |
| Describe | your unexp | ired personal property leases | | | Will the lease be assumed? | |
| Lessor's | name: | AmeriCredit/GM Financial | | | □ No | |
| | | | | | Yes | |
| Description Property: | on of leased | Opened Opened 06/20 Las Lease - 2020 Chevrolet Eq | | | | |
| Part 3: | Sign Below | | | | | |
| • | | rry, I declare that I have indicate at to an unexpired lease. | ed my intention about any | property of my estate that se | cures a debt and any personal | |
| • | Frank Gaffii | 1 | | lizabeth Gaffin | | |
| | nk Gaffin | | | abeth Gaffin | | |
| Sigr | ature of Debt | or 1 | Signa | ature of Debtor 2 | | |
| Date | Noven | nber 10, 2021 | Date | November 10, 2021 | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$78 | administrative fee |
| + \$15 | trustee surcharge |
| \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

| In 1 | Frank Gaffin re Elizabeth Gaffin | | Case No. | | |
|------|--|---------------------------------------|-------------------------|--------------------------------|---------|
| | Enzabeth Gamm | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPEN | NSATION OF ATTOI | NEV FOR DE | 'RTOR(S) | |
| | | | | , , | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered | or to |
| | For legal services, I have agreed to accept | | | 1,500.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,500.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | \$338.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed comp | ensation with any other person | unless they are members | pers and associates of my lav | v firm. |
| | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows. | | | | . A |
| 6. | In return for the above-disclosed fee, I have agreed to re | nder legal service for all aspect | s of the bankruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, and rendeb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of credited. [Other provisions as needed] | ement of affairs and plan which | may be required; | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee | e does not include the following | service: | | |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of any s bankruptcy proceeding. | y agreement or arrangement for | payment to me for re | epresentation of the debtor(s) |) in |
| | November 10, 2021 | /s/ Joseph Quinn | | | |
| _ | Date | Joseph Quinn | | | |
| | | Signature of Attorne Ross, Quinn & Pl | | | |
| | | 192 S. Hanover S | treet, Suite 101 | | |
| | | Pottstown, PA 19 610-323-5300 Fa | | | |
| | | Name of law firm | x. 010-323-0081 | | |

United States Bankruptcy Court Eastern District of Pennsylvania

| In re | Frank Gaffin Elizabeth Gaffin | Case No. | |
|--------|----------------------------------|--|--------------|
| | | Debtor(s) Chapter 7 | |
| The ab | | IFICATION OF CREDITOR MATRIX that the attached list of creditors is true and correct to the best of their | r knowledge. |
| Date: | November 10, 2021 | /s/ Frank Gaffin | |
| | | Frank Gaffin | |
| | | Signature of Debtor | |
| Date: | November 10, 2021 | /s/ Elizabeth Gaffin | |
| | | Flizabeth Gaffin | |

Signature of Debtor

Affirm, Inc. Attn: Bankruptcy 30 Isabella St, Floor 4 Pittsburgh, PA 15212

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Barclays Bank Delaware Attn: Bankruptcy Po Box 8801 Wilmington, DE 19899

Capital One AttnL: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Usa N Attn: Bankruptcy Po Box 30285

Cbna
Attn: Centralized Bankruptcy
Po Box 790034
St. Louis, MO 63179

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Comenitybank/trwrdsv Attn: Bankruptcy Po Box 182273 Columbus, OH 43218

ComenityCapital/Boscov Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Costco Anywhere Visa Card Attn: Bankruptcy Po Box 6500 Sioux Falls, SD 57117

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Flagstar Bank Attn: Bankruptcy 5151 Corporate Drive Troy, MI 48098

Freedom Credit Union Attn: Bankruptcy 626 Jacksonville Road, Suite 250 Warminster, PA 18974

IC Systems, Inc Attn: Bankruptcy Po Box 64378 St. Paul, MN 55164

Mariner Finance Attn: Bankruptcy 8211 Town Center Drive Nottingham, MD 21236

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Wilmington Sav Fund So 838 N Market Wilmington, DE 19899